

## Electronic Patent Application Fee Transmittal

|   |   |                 |               |                             |
|---|---|-----------------|---------------|-----------------------------|
| <b>Application Number:</b>                  | 10706100  |                 |               |                             |
| <b>Filing Date:</b>                         | 12-Nov-2003   |                 |               |                             |
| <b>Title of Invention:</b>                  | Pharmaceutical compositions including low dosages of desmopressin |                 |               |                             |
| <b>First Named Inventor/Applicant Name:</b> | Seymour H. Fein   |                 |               |                             |
| <b>Filer:</b>                               | Edmund R. Pitcher/Jane Legere                                     |                 |               |                             |
| <b>Attorney Docket Number:</b>              | SER-001   |                 |               |                             |
| Filed as Small Entity                       |   |                 |               |                             |
| <b>Utility      Filing Fees</b>             |   |                 |               |                             |
| <b>Description</b>                          | <b>Fee Code</b>   | <b>Quantity</b> | <b>Amount</b> | <b>Sub-Total in USD(\$)</b> |
| <b>Basic Filing:</b>                        |   |                 |               |                             |
| <b>Pages:</b>                               |   |                 |               |                             |
| <b>Claims:</b>                              |   |                 |               |                             |
| <b>Miscellaneous-Filing:</b>                |   |                 |               |                             |
| <b>Petition:</b>                            |   |                 |               |                             |
| <b>Patent-Appeals-and-Interference:</b>     |   |                 |               |                             |
| <b>Post-Allowance-and-Post-Issuance:</b>    |   |                 |               |                             |
| <b>Extension-of-Time:</b>                   |   |                 |               |                             |
| Extension - 3 months with \$0 paid          | 2253  | 1               | 525           | 525                         |

| Description       | Fee Code | Quantity | Amount | Sub-Total in USD(\$) |
|-------------------|----------|----------|--------|----------------------|
| Miscellaneous:    |          |          |        |                      |
| Total in USD (\$) |          |          |        | 525                  |